PATENT APPLICATION FEE DETERMINATION RECORI Effective December 8, 2004								ORD	Application or Docket Number  10/51997				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
U.S. NATIONAL STAGE FEES				•	. –		7	RATE	FEE	7	RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300	1	BASIC FEE	†		BASIC FEE	+	
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50/\$100		Allo	ther situations = 100 / \$ 200	1	EXAM. FEE	<u> </u>	┨┈	EXAM, FEE	300	
SEARCH FEE			U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		Allo	ther situations = 250 / \$ 500	1	SEARCH FEE	<del> </del>	1	SEARCH FEE	200	
FEE FOR EXTRA SPEC. PGS.			min	us 100 =		/50 =	1	X \$ 125 =		1	X \$ 250 =	400	
TOTAL CHARGEABLE CLAIMS			G mi	กมร 20 =	•		1	X \$ 25 =		OR	X \$ 50 =	<del> </del>	
INDEPENDENT CLAIMS			, minus 3 =		• .		1	X \$ 100 =		OR	X \$ 200 =	<del>                                     </del>	
		IDENT CLAIM PRI					1	+ \$ 180 =		OR	+ \$ 360 =	:	
* If the difference in column 1 is less than zero, er					in co	olumn 2	، ب	TOTAL	<del>                                     </del>	OR	TOTAL	900	
			•	,				•	<u> </u>	J		1930	
12	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST							SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	ŀ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	(0	Minus .	-20	<u>C</u>	= Ø		X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus	3	i	- 6		X'\$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
		,					•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT.		
•	·· · · · ·	(Column 1)		(Colum	n 23	(Column 3)							
		CLAIMS		HIGHE	sr	(Column 3)		·		1 1			
<u> </u>		REMAINING AFTER AMENDMENT	· · · · · · · · · · · · · · · · · · ·	PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus			3		X \$ 25 =		OR	X \$ 50 =		
₹	Independent	<u> </u>	WIII 103	***		=		X \$ 100 =	·	OR	X \$ 200 =		
	FIRST PRES	ENTATION OF MU	LTIPLE DEPE	NDENT CL	AIM .		ſ	+ \$ 180 =		OR	+ \$ 360 <del>=</del>	· ·	
								OTAL ADOIT.		OR	TOTAL ADDIT.		
								<b>L</b>			FEE [		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													